



COMMONWEALTH of VIRGINIA

Department of Motor Vehicles

2300 West Broad Street

D. B. Smit
Commissioner

Post Office Box 27412
Richmond, VA 23269-0001
866-DMV-LINE or
800-435-5137

Date: _____

Name: _____ Veh. Make and Year: _____

Address: _____ Veh. ID No.: _____

_____ Veh. License No. Issued: _____

_____ Title No.: _____

The Department of Motor Vehicles is accepting your application for Title and is issuing a set of license plates and a registration card only as an accommodation. You are solely responsible for and must furnish the requested funds evidence of ownership or information noted below before we can release a Virginia Title.

- ☐ A title issued by the State of _____ in your name or assigned to you.
- ☐ A current registration card issued by the State of _____ in your name.
- ☐ A Manufacturer's Certificate of Origin assigned to you.
- ☐ Bill(s) of Sale. (Individual sales must be signed by the Seller.)
- ☐ Showing your purchase.
- ☐ Showing previous owner's purchase. (Evidence of ownership)
- ☐ Actual Odometer Reading _____ (no tenths). If this is not the actual vehicle mileage, please check one of the following:
- ☐ Odometer exceeds mechanical limits or ☐ the odometer reading is not the actual vehicle mileage.
- ☐ Fees: \$ _____
- ☐ Taxes: \$ _____
- ☐ Other: _____

Please forward the requested documents to the Department of Motor Vehicles, Title and Registration Division, P.O. Box 27412, Richmond, Virginia 23269 with this form. When the required evidence of ownership is received, a Certificate of Title will be issued and released to the appropriate party.

Joseph H. Owsiak, Deputy Director
Title and Dealer Services

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